| President of Kwazuru-Hatal | Quotation Advert | |
|--|---|---------------|
| Opening Date: | 08/0/2020 | [p |
| Closing Date: | 2020-07-31 | [9] |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Mbongolwane hospital | lacksquare |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | MBONGOLWANE HOSPITAL | |
| Date Submitted | 2020-07-09 | Semake 110 |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 227 | |
| Item Category: | Goods | \geq |
| Item Description: | SUPPLY & DELIVER | |
| | 16" BASIC FOAM PRESSURE CUSHION (THICKNESS = 5CM) ,14" 5CM,24" 7.5CM,22" 7CM , 18" 5CM & 20" 7.5CM | |
| | SPEC ATTACHED ON QUOTATION | |
| | | |
| | | |
| | | |
| Quantity (if supplies) | 01 JOB | |
| COMPULSORY BRIEFING SESSIO | | |
| Select Type: | Not Applicable | V |
| Date: | · · · · · · · · · · · · · · · · · · · | |
| Time: | | D21 |
| Venue: | MADONICOL WANTE HOSDITAL | |
| 7 9 17 9 9 8 | MBONGOLWANE HOSPITAL | |

QUOTES CAN BE COLLECTED FROM:

MBONGOLWANE /SCM

QUOTES SHOULD BE DELIVERED TO:

MBONGOLWANE /SCM

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name:

M.N NTULI

Email:

mzikayisee.ntuli@kznhealth.gov.za

Contact Number:

Page 2 of 2

Finance Manager Name: £.S MGOBHOZI

Finance Manager Signature:

nce Manager Signature:

No late quotes will be considered

01/67/2020

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Note: